## Case 17-16295-mdc Doc 95 Filed 03/19/19 Entered 03/19/19 11:16:42 Desc Main Document Page 1 of 2

| Fill          | in this informati                | on to identify yo                                | our case:          |   |   |                               |  |   |  |  |
|---------------|----------------------------------|--|--------------------|---|---|-------------------------------|--|---|--|--|
|               | otor 1                           |  |                    |   |   | Chaol                         | c if this is:                            |   |  |  |
| 500           |                                  | Gaye Pomika Bigbee                               |                    |   |   |                               | An amended filing                        |   |  |  |
| Deb           | tor 2                            |  |                    |   |   |                               |  | ing postpetition chapter 13                 |  |  |
| (Spo          | ouse, if filing)                 |  |                    |   |   | 6                             | expenses as of the                       | following date:                             |  |  |
| Unit          | ed States Bankru                 | ptcy Court for the                               | EASTE<br>PHILAI    | MM / DD / YYYY  |   |                               |  |   |  |  |
| !             | nown)                            | -16295-MDC                                       |                    |   |   |                               |  |   |  |  |
|               | fficial Fo                       |  |                    |   |   |                               |  |   |  |  |
|               |                                  | J: Your I  |                    |   |   |                               |  | 12/1  |  |  |
| info<br>(if k | ormation. If mo<br>known). Answe | er every question                                | eded, attac<br>on. | If two married people are<br>ch another sheet to this fo                  | filing together, both<br>orm. On the top of a | n are equally<br>ny additiona | responsible for s<br>Il pages, write you | supplying correct<br>ur name and case numbe |  |  |
| Par<br>1.     | t 1: Descri                      | be Your House<br>case?                           | nold               |   |   |                               |  |   |  |  |
|               | ■ No. Go to                      |  |                    |   |   |                               |  |   |  |  |
|               |                                  |  | n a separa         | te household?   |   |                               |  |   |  |  |
|               | □ No<br>□ Ye                     |  | st file Offici     | al Form 106J-2, <i>Expenses</i> a   | for Separate Househo                          | oldof Debtor                  | 2.                                       |   |  |  |
| 2.            | Do you have                      | dependents?                                      | ■ No               |   |   |                               |  |   |  |  |
|               | Do not list De<br>Debtor 2.      | btor 1 and                                       | ☐ Yes.             | Fill out this information for each dependent                              | Dependent's relation Debtor 1 or Debtor       |                               | Dependent's age                          | Does dependent live with you?               |  |  |
|               | Do not state t                   | he   |                    |   |   |                               |  | □ No  |  |  |
|               | dependents n                     | ames.  |                    |   |   |                               |  | Yes   |  |  |
|               |                                  |  |                    |   |   |                               |  | □ No  |  |  |
|               |                                  |  |                    |   |   |                               |  | ☐ Yes<br>☐ No                               |  |  |
|               |                                  |  |                    |   |   |                               |  | ☐ Yes                                       |  |  |
|               |                                  |  |                    |   |   |                               |  | □ No  |  |  |
|               |                                  |  |                    |   |   |                               |  | ☐ Yes                                       |  |  |
| 3.            | expenses of yourself and         | enses include<br>people other th<br>your depende | nan<br>nts?        | No<br>  Yes   |   |                               |  |   |  |  |
| exp           | imate your exp                   |  | our bankru         | y Expenses<br>optcy filing date unless your is filed. If this is a supple |   |                               |  |   |  |  |
| valu          |                                  | istance and ha                                   |                    | overnment assistance if ged it on Schedule I: Your I                      |   |                               | Your exp                                 | enses                                       |  |  |
| 4.            |                                  | home owners                                      |                    | ses for your residence. In lot.   | clude first mortgage                          | 4. \$                         |  | 558.00                                      |  |  |
|               | If not include                   | ed in line 4:                                    |                    |   |   |                               |  |   |  |  |
|               | 4a. Real es                      | state taxes                                      |                    |   |   | 4a. \$                        |  | 0.00  |  |  |
|               |                                  | y, homeowner's                                   | , or renter's      | s insurance   |   | 4a. \$                        |  | 0.00  |  |  |
|               |                                  | •  |                    | ipkeep expenses   |   | 4c. \$                        |  | 100.00                                      |  |  |
|               | 4d. Homeo                        | wner's associati                                 | on or cond         | lominium dues   |   | 4d. \$                        |  | 0.00  |  |  |
| 5.            | Additional m                     | ortgage payme                                    | ents for vo        | ur residence, such as hon   | ne equity loans                               | 5. \$                         | ·  | 0.00  |  |  |

| Debtor      | ·1 <u>E</u> | Bigbee,      | Gaye Pomika   | Case num      | ber (if known)                        | 17-16295-MDC                 |
|-------------|-------------|--------------|---|---------------|---------------------------------------|------------------------------|
| 6. <b>U</b> | tilities    | ٠.           |   |               |                                       |                              |
| _           |             |              | heat, natural gas   | 6a.           | \$                                    | 213.37                       |
|             |             |              | ver, garbage collection   | 6b.           |                                       | 119.00                       |
| 6           |             |              | e, cell phone, Internet, satellite, and cable services                            | 6c.           | · · · · · · · · · · · · · · · · · · · |                              |
|             |             | •            |   |               | ·                                     | 190.00                       |
| _           |             | Other. Spe   | ·   | 6d.           | · · · · · · · · · · · · · · · · · · · | 0.00                         |
|             |             |              | ekeeping supplies   | 7.            | ·                                     | 200.00                       |
| . С         | hildca      | are and c    | hildren's education costs   | 8.            | \$                                    | 0.00                         |
| С           | lothin      | ng, laundı   | ry, and dry cleaning  | 9.            | \$                                    | 50.00                        |
| 0. <b>P</b> | erson       | al care p    | roducts and services  | 10.           | \$                                    | 50.00                        |
| l. <b>M</b> | ledica      | al and der   | ntal expenses   | 11.           | \$                                    | 330.00                       |
| 2. <b>T</b> | ransp       | ortation.    | Include gas, maintenance, bus or train fare.                                      |               | -                                     |                              |
|             |             |              | ar payments.  | 12.           | \$                                    | 204.00                       |
| 3. <b>E</b> | nterta      | ainment, d   | clubs, recreation, newspapers, magazines, and books                               | 13.           | \$                                    | 0.00                         |
|             |             |              | ributions and religious donations   | 14.           | \$                                    | 50.00                        |
|             | surar       |              |   |               | ·                                     | 00.00                        |
|             |             |              | surance deducted from your pay or included in lines 4 or 20.                      |               |                                       |                              |
|             |             | ife insura   | , , ,   | 15a.          | \$                                    | 0.00                         |
|             |             | Health ins   |   | 15b.          | ·                                     |                              |
|             |             |              |   |               | ·                                     | 0.00                         |
|             |             | /ehicle ins  |   | 15c.          | ·                                     | 0.00                         |
|             |             |              | rance. Specify:   | 15d.          | \$                                    | 0.00                         |
|             |             |              | clude taxes deducted from your pay or included in lines 4 or 20.                  |               |                                       |                              |
| S           | pecify:     | /:           |   | 16.           | \$                                    | 0.00                         |
|             |             |              | ease payments:  |               |                                       |                              |
| 1           | 7a. C       | Car payme    | ents for Vehicle 1  | 17a.          | \$                                    | 0.00                         |
| 1           | 7b. C       | Car payme    | ents for Vehicle 2  | 17b.          | \$                                    | 0.00                         |
| 1           | 7c. C       | Other. Spe   | ecify:  | 17c.          | \$                                    | 0.00                         |
|             |             | Other. Spe   | •   | 17d.          | \$                                    | 0.00                         |
|             |             | •            | of alimony, maintenance, and support that you did not report as                   |               | <u> </u>                              | 0.00                         |
|             |             |              | our pay on line 5, Schedule I, Your Income (Official Form 106I).                  | 18.           | \$                                    | 0.00                         |
|             |             |              | s you make to support others who do not live with you.                            |               | \$                                    | 50.00                        |
|             |             |              | ch Tilthe   | 19.           | ·                                     |                              |
|             |             |              | erty expenses not included in lines 4 or 5 of this form or on Sche                |               | ır Income                             |                              |
|             |             |              | on other property   | 20a.          |                                       | 0.00                         |
|             |             |              |   |               | · · · · · · · · · · · · · · · · · · · |                              |
|             |             | Real estate  |   | 20b.          |                                       | 0.00                         |
|             |             |              | nomeowner's, or renter's insurance  | 20c.          |                                       | 0.00                         |
| 20          | 0d. N       | Maintenan    | ce, repair, and upkeep expenses   | 20d.          | \$                                    | 0.00                         |
| 20          | 0e. H       | Homeowne     | er's association or condominium dues  | 20e.          | \$                                    | 0.00                         |
| 1. <b>O</b> | ther:       | Specify:     |   | 21.           | +\$                                   | 0.00                         |
|             |             |              |   |               |                                       |                              |
|             |             | -            | monthly expenses  |               |                                       |                              |
|             |             |              | through 21.   |               | \$                                    | 2,114.37                     |
| 2           | 2b. Cc      | opy line 22  | 2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2              |               | \$                                    |                              |
| 2           | 2c. Ad      | dd line 22a  | a and 22b. The result is your monthly expenses.                                   |               | \$                                    | 2,114.37                     |
|             |             |              |   |               |                                       |                              |
|             |             |              | monthly net income.   |               | _                                     |                              |
| 2           | 3a. C       | Copy line    | 12 (your combined monthly income) from Schedule I.                                | 23a.          | \$                                    | 2,734.00                     |
| 2           | 3b. C       | Copy your    | monthly expenses from line 22c above.   | 23b.          | -\$                                   | 2,114.37                     |
|             |             | -            |   |               |                                       | <u> </u>                     |
| 2           | 3c. S       | Subtract vo  | our monthly expenses from your monthly income.                                    |               | 1_                                    |                              |
|             |             |              | is your monthly net income.   | 23c.          | \$                                    | 619.63                       |
|             |             |              | •   |               |                                       |                              |
|             |             |              | n increase or decrease in your expenses within the year after yo                  |               |                                       |                              |
|             |             |              | ou expect to finish paying for your car loan within the year or do you expect you | ur mortgage p | payment to incre                      | ase or decrease because of a |
|             | _           | ition to the | terms of your mortgage?   |               |                                       |                              |
|             | No.         |              |   |               |                                       |                              |
| Г           | ] Yes.      |              | Explain here:   | _             |                                       |                              |
|             |             |              | <u> </u>  |               |                                       |                              |